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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 10/228,907 08/27/2002 PAT 6,695,883 *OK AR*
 which claims benefit of 60/371,837 04/11/2002

** FOREIGN APPLICATIONS ***** *NONE AR*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>Annita Rene AR</i> Initials	STATE OR COUNTRY TX	SHEETS DRAWING 7	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
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TITLE
 Femoral neck fixation prosthesis

FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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